ENGIE

GAS SAFETY CERTIFICATE

This form can be used as a Landlord's gas safety certificate

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GAS safe REGISTER

Enter Company Registration Number

Engineer [redacted]

Gas Safe [redacted]

Engie Office Address 14A. ENDCLIFFE AVE. SHEFFIELD. S10 3EA.

Contract Number UNI OF SHEFFIELD.

Customer Name FROGGATT AP A/C

Site Address 21 ENDCLIFFE CRES SHEFFIELD

Postcode S10 3EW

Received By NO ONE Signature

Landlords Details If Different

Name

Address

Postcode

Rented Accommodation YES/NO

App	Landlords appliance Yes/No	Service Inspection Repair	Appliance Details: Location	Type	Model	Serial Number	Burner Manufacturer	Flue Type (OF/RS/FL)
1	YES	SERVICE	PLANT ROOM	BOILER 3 BRAG.	REMEHA QUINTA PRO 115	1509811258950		OF.
2								
3								
4								

General Safety Checks	Result	General Safety Checks	Result
Gas booster/compressor operating correctly (Yes /No/NA)	NA	Flue termination satisfactory (Yes/No/NA)	YES
Is there a current gas installation line diagram at primary meter (Yes/No/NA)	NO	Has a tightness test been carried out from local isolation valve (Yes/No/NA)	YES
Is the meter installation correct (Yes/No)	YES	Is gas pipework electrically bonded (Yes/No)	YES
Gas installation pipework adequately supported (Yes/No)	YES	Are adequate emergency isolation valves fitted (Yes/No)	YES
Gas installation pipework sleeved and sealed as appropriate (Yes/No)	YES	Are emergency valve handles in place and labelled (Yes/No)	YES
Is gas pipework colour coded or identified (Yes/No/NA)	YES	Do valves fail to the correct position (Yes/No)	YES
Is flue system installed in accordance with standards (Yes/No)	YES	Area clear of combustible materials (Yes/No)	

Ventilation			
Low level free area cm² ~~or ventilation flow rate inlet m³/h~~	Actual 2272	Required (Calculated)	686
High level free area cm² ~~or ventilation flow rate extract m³/h~~	Actual 1075	Required (Calculated)	456
All ventilation grills clear and unobstructed (Yes/No)	YES.	Fans and/or flue interlocks operating correctly (Yes/No/NA)	NA.

Details of any faults	Remedial Action Taken	Comments and calculations

Appliance Checks	~~App 1 or~~ App 1 High	~~App 2 or~~ App 1 Low	~~App 3 or~~ App 2 High	~~App 4 or~~ App 2 Low		~~App 1 or~~ App 1 High	~~App 2 or~~ App 1 Low	~~App 3 or~~ App 2 High	~~App 4 or~~ App 2 Low		~~App 1 or~~ App 1 High	~~App 2 or~~ App 1 Low	~~App 3 or~~ App 2 High	~~App 4 or~~ App 2 Low
Flue flow test satisfactory (Yes/No/NA)	NA	NA	NA	NA	~~Gas burner pressure (mbar) or~~ heat input kW/h required	114	114			Carbon Dioxide (CO_2) (%)	9.0	9.1		
Spillage test satisfactory (Yes/No/NA)	YES	YES	YES	YES	Gas burner pressure (mbar) or heat input kW/h measured	19	22			Excess Air (%)	32.7	31.4		
Air/Gas switch operating correctly (Yes/No/NA)	NA	NA	NA	NA	Gas rating measured (kW/h / NA)	110.3	23.8			CO/CO_2 Ratio	0.0005	0.0000		
Flame proving devices operating correctly (Yes/No/NA)	YES	YES	YES	YES	Air/gas ratio control setting (%/NA)	NA	NA			Gross Efficiency (%)	98.4	98.9		
Burner lock out time (seconds)	83	83			Net flue gas temperature (gross less ambient) (°C)	35.6	26.6			CO flue dilution (ppm)	NA	NA		
Temperature and limit thermostats operating correctly (Yes/No)	YES	YES.			Oxygen (O_2 %)	5.2	5.0			Standing pressure (mbar)	22.5	22.5		
Heat net input rating data (kW)	114	114			Carbon Monoxide (CO)(ppm)	49	8			Working pressure (mbar)	19	22.		

Is appliance safe for use (Yes/No)	YES YES
Has a warning advice notice been raised (No or Warning notice Ser No or No's)	NO
Test Instrument	
Test Instrument serial number	

Worksheet No (if used)	
Checked by (office use)	
Entered on database	

Declaration of gas safety - I confirm that all of the above work described on this form has been satisfactorily completed in accordance with the current Gas Safety (installation and use) regulations, standards and procedures.

Date 21/06/20[redacted]

Signature [redacted]

Distribution: [redacted] - Site, Green - Engineer